

OFFICIAL ENTRY FORMS

<u>Lee Valley London S.C</u> <u>SYNCHRONISED SKATING COMPETITION 2017</u>

A separate entry form must be submitted for each team entered.

	Please
	Tick
SENIOR	
JUNIOR	
ADVANCED NOVICE	
BASIC NOVICE A	
BASIC NOVICE B	
SENIOR B	
JUNIOR B	
ADVANCED NOVICE B	
JUVENILE	
ELEMENTARY	
PRELIMINARY	
MIXED AGE	
ADULT 1	
ADULT 2	

TEAM NAME:	
CLUB/RINK:	
COUNTRY:	
COACH NAME & SIGNITURE:	



A separate entry form must be submitted for each team entered

<u>Please enter synchro team members name in alphabetical order followed by alternates.</u> <u>Please indicate team captain with an asterisk *</u>

For UK teams it is essential that skater's test passes and NISA numbers are entered below.

Skaters Name	Date of Birth	Age on July 1 st 2017	UK TEAMS ONLY Field Move test level	UK TEAMS ONLY NISA Number
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

ONLY THOSE NAMED WILL BE ABLE TO SKATE

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE THAT ALL SKATERS ARE ELIGIBLE OR RETAINED ELIGIBLE SKATERS. (If retained all have submitted the appropriate Elig. 4 & 5 forms to NISA)

Coach N	ame:			 	
Coach S	ignatu	ıre:	 		
Date:	/	/			



Declaration Form

Lee Valley London S.C

SYNCHRONISED SKATING COMPETITION

Lee Valley Ice Centre

<u>DECLARATION:</u> This declaration must be signed by either the Skater if 18 years old or over or Parent/Guardian and returned with the official entry form by the closing date 'Friday 6th October 2017'

I also give permission for the official photographer to take photos/videos. I also understand **NO OTHER PERSON SHOULD DO THIS.**

I have read and agree to abide by the rules of the event and to observe the rules and directions of LVRPA/L.V.L.S.C

SIGNITURES MUST CORRESPOND WITH THOSE NUMBERS ON THE PREVIOUS PAGE.

	Skaters Signature	Parent/Guardian Signature
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Cianad	Position in club	Data
oigneu	Osition in Glub	Date

The Entry Form cannot be accepted unless accompanied with this form, which should contain the appropriate number of signatures to match the entrants.



All music must be on a CD with the Team's name, event title and music length (not the skating time) clearly indicated. A spare copy should be readily available rink side.

Cassette tapes will not be accepted.

MUSIC DETAILS (Please fill in carefully as this information is required for entry)				
Short programme Music Title:	Composer(s):			
	Time: (Mins/Secs)			
Free Programme Music Title:	Composer(s):			
	Time: (Mins/Secs)			

Interpretation details on the Short and Free Programmes: i.e. give details of the piece of music you have chosen, including where the music came from. If it is from a soundtrack, state where the section of music is taken from in relation to the soundtrack, and what you are interpreting on the ice, as well as background information regarding the piece of music selected.



IMPORTANT:

- By entering the event, there is an acceptance that the child/participant may be photographed and/or videoed, and that images may be published by the Lee Valley London S.C, unless the non-consent form below states otherwise
- This event will be judged under the ISU International Judging System which
 necessarily involves video to allow for video replay at the event. Skaters /
 Parents / Guardians may not opt out of this requirement as it is a condition of
 entry.
- Skaters, parents/guardians and Team Managers should be aware that synchronised skating is a TEAM event and the non-consent (to photograph) for any one skater means that the entire will not be allowed to be photographed or videoed. In the event that the Team concerned achieves a podium place the skater concerned may choose not to join the team on the podium.

Non-consent by synchro parents requires a separate sheet for a parent/guardian of each under 18 Skater.

TROPHY	IG
I DO NOT consent to taking of photographs/video (Other than the purpose of IJS) by the official Photographer/Videographer at the event named above.	
Skaters NameTeam Name	
Signed(Parent/Guardian)	
Team Manager: I acknowledge the above non-consent and confirm that video/photography (other than IJS) of the entire team may be permitted.	
Signed(Team Manager)DateDate	

PROGRAMME CONTENT SHEET

ΙE	eam Name	Ī	_ Ca	ategory:		
Ri	nk/Club: _		_			
*T	ime durin	g programme				
		<u>Elements</u>	in or	der of ska	ting	
	Time*	Elements in SP (Junior & Senior Only)		Time*	Elements in FP	
1			1			
			2			
2			3			
			4			
3			5			
			6			
4			7			
			8			
5			9			
			10			
6			11			
			12			
7			13			
			14			
8			15			
			16			

Coach Signature:

17

18



CONTACT INFORMATION SHEET

Team Coaches:

Email

	Coach 1	Coach 2
Name		
Nisa Number		
Field Move Venue		
& Date		
Coaches		
Conference Date		
Signature		
Team Manager:		
Name		
Address		
Audiess		
Postcode		Telephone Number

CLOSING DATE FOR THIS EVENT IS				
FRIDAY 6 TH OCTOBER 2015				
LATE AND IMC	COMPLETE ENTRIES MAY NOT BE ACCEPTED			
CHEQUE ENCLOSED \Box	(CHEQUE AMOUNT £)			
PLEASE MAKE CHEQUES PAYAB	LE TO 'Lee Valley London Skating Club'			
BANK TRANSFER IS ALSO ACCEPPTABLE USING THE FOLLOWING DETAILS;				
Account Name: Lee Valley London Skating Club				